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## ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NU	MBEK: 054200001		CITY OR TOW	N HOPEDAI	LE	
APPLICATIO	N FOR RENEWAL	Annual	LICE	ENSED FOR 2	013	
		CLASS			YEAR	
LICENSEE N DOING BUSI		E COUNTRY CLUB INC.				
ADDRESS O	FF MILL STREET					
CITY/TOWN	: HOPEDALE	STATE: MA	ZIP CODE:	01747		
MANAGER:	MARTIN, HANNAH	TYPE OF LICENSE: R	estaurant	CATEGORY:	All Alcohol	
EMAIL ADDI	RESS:					
	PLEASE ALSO VISI	T OUR WEBSITE AND ENTER YOUR	EMAIL ADDRESS		_	
DESCRIPTIO	N OF LICENSED P	REMISES:				
GREEN ARE	A, AND PATIO UN	TING OF 1ST FLOOR ST DER COVERED DECK. 2 TWO BATHROOMS, A F	2ND FLOOR CON	SISTS OF A D	INING	
I hereby certif	y and swear under pe	enalties of perjury that:				
1. the	renewed license wil	l be of the same type for th	e same premises no	ow licensed;		
2. the	licensee has complie	ed with all laws of the Com	nmonwealth relating	g to taxes; and		
3. the	premises are now or	en for business (If not exp	olain below)			
SIGNED BY		Partner or Authorized Corp	oorate Officer			
DATE:			EMPLOY	VED IDENTIFICATI	EION NUMBER	
DATE.	TELE	PHONE NUMBER:		YER IDENTIFICATION INDIVIDUAL SOCIAL SECTION S		
	(Note: NOT Individual Social Security Number)					
Acts of 2004,	signed by the build	we are in possession (1) the ling inspector and the heat cate of liquor liability ins	ad of the fire depa	rtment for the	above	
Please Check Bel	ow:		LOCAL LICE	NSING AUTH	ORITY	
APPROVED: By:						
DISAPPROV						
(If disapprove	d explain)		-			
DATE:						
DATE.						



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## OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054200002		CITY OR TOWN	HOPEDAL	E
APPLICATION FOR RENEWAL:	Annual	LICEN	SED FOR 20	013
	CLASS			YEAR
LICENSEE NAME: J & M AND SO	ONS, INC.			
DOING BUSINESS A HOPEDALE	PACKAGE STORE			
ADDRESS 130 MENDON ST				
CITY/TOWN: HOPEDALE	STATE: MA	ZIP CODE:	01747	
MANAGER: NEVES, GARY J.	ГҮРЕ OF LICENSE: Pac	kage Store CA	ATEGORY:	All Alcohol
EMAIL ADDRESS:				
PLEASE ALSO VISIT OU	UR WEBSITE AND ENTER YOUR EM	IAIL ADDRESS		
DESCRIPTION OF LICENSED PRE	MISES:			
FIRST FLOOR OF A TWO STORY I STORAGE. MAIN ENTRANCE ON EMERGENCIES. LICENSE SHALL CONFORMING USE	MENDON ST. REAR E	XIT FOR DELIVE	RIES AND	AR FOR
I hereby certify and swear under penal	ties of perjury that:			
1. the renewed license will be		same premises now	licensed;	
2. the licensee has complied v	with all laws of the Comn	nonwealth relating to	taxes; and	
3. the premises are now open	for business (If not expla	in below)		
SIGNED BY				
Individual, Part	tner or Authorized Corpo	rate Officer		
DATE				
DATE: TELEPHONE NUMBER:		EMPLOYER IDENTIFICATION NUMBER: (Note: NOT Individual Social Security Number)		
		(1101c. <u>1101</u> Inc	ividuai Sociai S	ecurity Number)
Please Check Below:		LOCAL LICENS	ING AUTHO	ORITY
APPROVED:		By:		
DISAPPROVED: (If disapproved explain)				
(11 disappioved explain)				_
				_
DATE:				

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 \$ 16A)



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## OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER:	054200004		CITY OR TOWN	HOPEDAL	Æ
APPLICATION FOR I	RENEWAL:	Annual	LICEN	SED FOR 20	)13
		CLASS			YEAR
LICENSEE NAME:	HOPEDALE MART,	LLC			
DOING BUSINESS A	HOPEDALE MART				
ADDRESS 404 SOUT	H MAIN				
CITY/TOWN: HOPE	DALE	STATE: MA	ZIP CODE:	01747	
MANAGER: DOUD.	AK, MOUNA TYPE (	OF LICENSE: Pac	ekage Store CA	ATEGORY:	Wine and Malt Regular
EMAIL ADDRESS:					
	EASE ALSO VISIT OUR WEBSI		MAIL ADDRESS		_
DESCRIPTION OF LI		:			
Gas station, package st I hereby certify and swe					
3. the premises	has complied with all sare now open for bus	siness (If not expla	ain below)	taxes; and	
DATE:	TELEPHONE N	IUMBER:	EMPLOYER (Note: <u>NOT</u> Ind		TION NUMBER: ecurity Number)
Please Check Below:			LOCAL LICENS	ING AUTHO	ORITY
APPROVED:	1		By:		
DISAPPROVED: (If disapproved explain	<u>]</u> )				
DATE:					
APPLICATION FOR RENEWA	L MUST BE FILED BY LICEN	NSEES DURING THE M	ONTH OF NOVEMBER (M	.G.L. Ch. 138 \$ 16	5A)



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## OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUM	BER: 054200005		CITY OR TOV	MN HOPEDAL	LE
APPLICATION	FOR RENEWAL:	Annual	LIC	CENSED FOR 2	013
		CLASS			YEAR
	ME: JONSIN LLC ESS A GRAPE EXPEC	CTATIONS			
ADDRESS 156	HARTFORD AVENUE	B			
CITY/TOWN:	HOPEDALE	STATE: MA	ZIP CODE	: 01747	
MANAGER: A	ABIMERHI, JOHN TY	PE OF LICENSE: Pa	ckage Store	CATEGORY:	All Alcohol
EMAIL ADDRE	ESS:				
	PLEASE ALSO VISIT OUR	WEBSITE AND ENTER YOUR I	EMAIL ADDRESS		_
DESCRIPTION	OF LICENSED PREM	ISES:			
NEW CONSTRU HARTSFORD A	UCTION-2800 SQ. FT. AVE	OF RETAIL SPACE	BEING SUITES	3 1, 2, AND 3 A	Т 156
2. the lie	enewed license will be o censee has complied with remises are now open for	th all laws of the Com or business (If not exp	monwealth relati		
	Individual, Partne	er or Authorized Corp	orate Officer		
DATE:	TELEPHO:	NE NUMBER:		DYER IDENTIFICAT	
Please Check Below APPROVED: [ DISAPPROVED] (If disapproved e	D:		LOCAL LICE By:	ENSING AUTH	ORITY
DATE:					

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 \$ 16A)



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## OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBE	R: 054200006		CITY OR TOWN	HOPEDAL	Æ
APPLICATION FO	R RENEWAL:	Annual	LICEN	SED FOR 20	013
		CLASS			YEAR
LICENSEE NAME:	THE LITTLE	WHITE MARKET INC.			
DOING BUSINESS	A THE LITTL	E WHITE MARKET			
ADDRESS 5 DEPO	T STREET				
CITY/TOWN: HO	PEDALE	STATE: MA	ZIP CODE:	01747	
	ERATORE, ACEY	TYPE OF LICENSE: Pac	ckage Store CA	ATEGORY:	Wine and Malt Regular
EMAIL ADDRESS:	,				
	PLEASE ALSO VISIT (	OUR WEBSITE AND ENTER YOUR E	MAIL ADDRESS		
DESCRIPTION OF					
		PARCEL OF LAND WITH A FRONT & SIDE EN			RY
2. the licens	see has complied	be of the same type for the with all laws of the Common for business (If not expl	nonwealth relating to		
SIGNED BY	Individual, Pa	urtner or Authorized Corpo	orate Officer		
DATE:	TELEP	HONE NUMBER:	EMPLOYER (Note: <u>NOT</u> Ind		TON NUMBER: ecurity Number)
Please Check Below: APPROVED: DISAPPROVED: (If disapproved expl	ain)		LOCAL LICENS By:	ING AUTHO	ORITY
DATE:					

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 \$ 16A)



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## ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 054200007	C	CITY OR TOWN HOPEDALE
APPLICATION FOR RENEWAL:	Annual	LICENSED FOR 2013
	CLASS	YEAR
LICENSEE NAME: LIZ'S DIAMOND	BAR & GRILLE INC.	
DOING BUSINESS A LIZ'S DIAMON	D BAR & GRILLE	
ADDRESS 1 MENFI WAY		
CITY/TOWN: HOPEDALE	STATE: MA	ZIP CODE: 01747
MANAGER: CARTER, TY ELIZABETH M.	PE OF LICENSE: Resta	urant CATEGORY: All Alcohol
EMAIL ADDRESS:		
PLEASE ALSO VISIT OUR W	VEBSITE AND ENTER YOUR EMA	IL ADDRESS
DESCRIPTION OF LICENSED PREMI		
LOCATED AT LOT 20A, BUILDING, STORY BUILDING OF WHICH 5000 SVACANT, AND 720 S.F OUTDOOR PA	SQ FT OF RESTAURA	
I hereby certify and swear under penaltie	s of perjury that:	
1. the renewed license will be of	the same type for the sa	ame premises now licensed;
2. the licensee has complied with	h all laws of the Commo	onwealth relating to taxes; and
3. the premises are now open for	r business (If not explain	n below)
SIGNED BY Individual, Partne	r or Authorized Corpora	ate Officer
DATE: TELEPHON	NE NUMBER:	EMPLOYER IDENTIFICATION NUMBER:
12231161	VE I VEIVIBER	(Note: <u>NOT</u> Individual Social Security Number)
Acts of 2004, signed by the building in	spector and the head o	certificate required by Chapter 304 of the of the fire department for the above nnce required by Chapter 116 of the Acts
Please Check Below:		LOCAL LICENSING AUTHORITY
APPROVED:		By:
DISAPPROVED:		
(If disapproved explain)		
DATE:		

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